

**State of Board of Health  
Minutes  
January 29, 2010 – 9:00 a.m.  
Perimeter Center, 9960 Mayland Drive  
Richmond, Virginia 23233**

Members present: Dr. Craig Reed, Vice Chairman; Dr. Julie Beales; Scott Burnette; Paul Clements; Jim Edmondson; Bruce Edwards; Dr. Anna Jeng; Dr. Charles Johnson; Willis Logan; Dr. Bennie Marshall; Dr. Bhushan Pandya; and David Summers.

Members absent: Barbara Favola, Fred Hannett, and Ed Spearbeck.

VDH staff present: Dr. Karen Remley, State Health Commissioner; Jeff Lake, Deputy Commissioner for Community Health Services; Joan Martin, Deputy Commissioner for Administration; Joe Hilbert, Executive Advisor; Martha Pulley, Policy Advisor; Catherine West, Administrative Assistant; Dr. Joanne Wakeham, Director of Public Health Nursing; Gary Brown, Director of the Office of Emergency Medical Services; Paul Sharpe, Trauma & Critical Care Manager, Office of Emergency Medical Services; Michael McMahon, Deputy Director, Office of Financial Management; Dr. Michael Royster, Director, Office of Minority Health and Public Health Policy; Dr. Keri Hall, Director of the Office of Epidemiology; and Nevena Skoro and Janet Mulligan, guests of the Commissioner

Others Present: Robin Kurz, Attorney General's Office.

Call to Order

Fred Hannett was absent due to pressing personal business so Dr. Craig Reed as Vice Chair led the meeting.

Dr. Reed convened the meeting at 9:00 a.m.

Approval of Minutes

The minutes of the October 23, 2009 Board meeting were approved unanimously.

Matrix of Pending Regulatory Actions

Joe Hilbert reviewed the listing of all of the pending VDH regulatory actions. There were no questions.

Commissioner's Report

Dr. Remley introduced Nevena Skoro, Policy Analyst in VDH's Office of Emergency Medical Services. Dr. Remley invited her to attend the meeting and meet the Board in recognition of the superior level of service that she has provided to the agency.

The Robert Wood Johnson Foundation county health rankings will be released in mid February. VDH is preparing talking points that will be shared with the executive branch, legislators, local health districts, and Board members.

Dr. Remley announced the following employment news:

- Dr. Susan Fischer Davis is new Henrico Health District Director;
- Dr. Jose Rodriguez is new Portsmouth Health District Director;
- Dr. Kay Rankin has resigned as Director of the Crater Health District to join the private sector. Dr. Charles Konigsberg has temporarily come out of retirement to serve as Acting Director for that district.
- Dr. Lisa Kaplowitz, Director of the Alexandria Health District, has been named Director of the Office of Policy and Strategic Planning, located within the U.S. Department of Health and Human Services' Office of the Assistant Secretary for Preparedness and Response.
- Matt Cobb has been appointed Deputy Secretary of Health and Human Resources. His responsibilities at the Office of the Attorney General are currently being divided among three staff.

Dr Remley provided the following update concerning H1N1:

The first phase is over and VDH is currently in the middle of the second phase.

There was a discussion concerning the extent to which information provided by anti-immunization groups complicated VDH's efforts. There was some misinformation early on that VDH worked effectively to counteract. People who wanted to get vaccine did so. There were some people who refused no matter what. This was a purely voluntary campaign. Virginia did very well compared to other states. Eighteen percent of the entire state population has been vaccinated; VDH's target is 20% and the stretch goal is 25%. Seasonal flu vaccination rates were also higher this year. At the national level, there was rapid development of a safe, effective vaccine from April to October.

There has been a significant expansion of use of Virginia Immunization Information System over a five month period.

There was a discussion that there may now be a public expectation of free, publicly available seasonal flu vaccine, but, in fact, there is no VDH budget to support that expectation. Most seasonal flu vaccine is purchased and provided through the private sector. The private sector also decides how much is made and how it is allocated. VDH is working with the federal government to request use of available unexpended H1N1 funds to purchase seasonal flu vaccine to conduct a focused vaccination campaign for the coming year, rather than having to return the unspent funds to the federal government.

Mr. Burnette remarked that his hospital experienced resistance from members of the community concerning use of nasal mist since it is a live vaccine. He also publicly praised Dr. Charlie Devine, Pittsylvania/Danville District Director, for the job he did. According to Mr. Burnette, Dr. Devine is always available, very helpful, “phenomenal.” Dr. Pandya offered very similar compliments concerning Dr. Devine.

Dr. Remley told the Board that VDH’s response to the H1N1 threat was a great opportunity to demonstrate the relevance of VDH and public health as well as the value of public health nursing.

There was a discussion concerning whether there will be a time when the H1N1 vaccine will no longer be given. Dr. Remley stated that VDH does not know if there will be a third wave of H1N1 disease or not. The CDC recommendation is to continue vaccination.

In February each year CDC recommends components for the next year’s seasonal flu vaccine. VDH believes H1N1 will be included in the components for seasonal flu vaccine.

There was a discussion that it is hard to reach the members of the 18-24 age group that are not in college or the military.

There was a discussion concerning why school children were not offered a second dose of vaccine. Dr. Remley explained that in some districts they were but in others, the school districts did not/would not let VDH back in the school for administration of a second dose.

Mr. Summers requested an electronic copy of Dr. Remley’s presentation, which was sent to him after the meeting.

#### Budget Update

Mike McMahon provided the budget update. There was a discussion concerning the rationale for the elimination of district pharmacies. Dr. Remley stated that there was no choice that VDH made as part of its budget reduction plan that represented a good choice. VDH focused on mandatory vs. optional services. VDH also looked at services that were not offered statewide in developing budget reduction recommendations.

There was a discussion about one item in the introduced budget to establish a new permit fee that VDH would assess and collect from marinas in order to support the VDH Marine Program. The discussion focused on the potential impact of the new fee on a marina’s willingness to comply with requirements to provide sewage pump out service.

#### Legislative Update

This was provided by Joe Hilbert. There was a brief discussion concerning the intent of SB540 and what this bill is trying to accomplish. Mr. Hilbert stated that VDH would examine this bill more closely.

There was a discussion of the impact of the increasing deer population in Northern Virginia with regard to bills that were introduced pertaining to Lyme disease.

#### Healthcare Associated Infections (HAI) Update

Dr. Keri Hall provided this presentation to the Board.

VDH is receiving ARRA funds which are specifically for HAI prevention in hospitals; VDH will move into long term care settings later. There was a discussion of how best to track surgical site infections once a patient has been discharged, given that this practice is very resource intensive. CDC recommends focusing on those infections that are serious enough to warrant readmission.

The funding VDH has received is not geared specifically to long term care but VDH nevertheless intends to eventually provide training to long term care facilities.

Mr. Clements requested that a long term care representative be included on the VDH task force. Dr. Hall indicated that there already is a long term care representative on the expert panel but she will add a long term care representative to the advisory board.

The goals are to develop best practices, reduce HAIs, and save lives. VDH already has HAI reporting regulations.

Mr. Edmondson said ultimate goal should be to prevent deaths that currently occur. He said that the whole attitude in the health care world needs to change, and needs to recognize that this really is a problem. Mr. Edmondson further stated that it is his view that this as a big public health issue.

Dr. Remley commented that this is a societal issue. That the issue is not just washing hands and preventing infection, but also thinking about how people access and use the health care system.

Dr. Pandya indicated that feedback to physicians is essential.

#### Public Comment

There were no comments from any member of the public.

#### Birthing Center Pilot Project

Jeff Lake provided the Board with an overview of the legislative background and statutory framework as well as the Board's prior involvement with this issue. In 2005, the General Assembly enacted § 32.1-11.5 of the Code of Virginia, authorizing the Board of Health to approve pilot programs to improve access to obstetrical care in underserved areas. The Board had received an initial proposal in 2006, but had declined to approve it at that time.

Shirley Dodson-McAdoo, President of the Family Maternity Center of the Northern Neck (Center), presented the Board with a proposal for a birthing center pilot project.

Dr. James Hamilton, the Center's Medical Director, offered further comments. The Center's top priority is patient safety. Dr. Hamilton assured the Board that every possible step has been taken to ensure patient safety

Dr Susan Lanni, Associate Professor of OBGYN, at VCU stated that she assumes that everyone is a high risk pregnancy until proven otherwise. She further stated that she is comfortable with this proposal. Women who do not receive any prenatal care are at risk for bad birth outcomes. The Centering Pregnancy model will be used – this involves individual time with care giver with added benefit of support of other pregnant women who are at the same stage of pregnancy.

Mr. Edmondson asked if this is a mechanism for demonstrating that the level of cesarean sections does not have to be so high. Dr. Lanni indicated that in an appropriately selected population, the cesarean section rate is lower than average in birth centers across the country. The birthing center should be seeing reduced cesarean section rates.

In answer to a question from the Board, Dr. Lanni indicated that the average length of stay at the birthing center is seven to 11 hours

Mr. Summers asked if proposals for other birth center pilot programs in other parts of state could be anticipated. Dr. Lanni answered yes, in Emporia/Greenville. Mr. Lake pointed out that any such additional proposals would need to come before the Board for approval.

Dr. Pandya commented on a variety of patient safety, emergency protocol, and medical malpractice issues.

Dr. Remley expressed support for the proposal. She stated that Virginia is fortunate to have such a thoughtful group of people involved. She further commented that the planning and preparation of the proposed pilot project has been careful, thoughtful, and deliberate. VDH can expect to see a reduction in the infant mortality rate in the Northern Neck as a result of this pilot program. This will also promote medical homes in the Northern Neck.

Dr. Beales expressed support for the proposal. Mr. Burnette also commended the proposal.

Dr. Jeng asked how evaluation/impact will be conducted. Mr. Lake answered that the Code of Virginia requires an evaluation be submitted annually to the Board of Health.

The proposal was unanimously approved by the Board.

#### Prehospital Patient Care Reporting System - Minimum Data Set

Gary Brown presented the minimum data set for the prehospital patient care reporting system. He stated that EMS agencies support the new Virginia EMS Registry.

Laptop computers have been provided to all EMS agencies for data collection.

Mr. Edwards commented that this is a wonderful program that will put Virginia on same level of other states; that it will improve data collection and analysis capabilities. He also stated that some implementation issues have arisen and there may be a delay in implementation by all EMS

agencies. Mr. Edwards requested that the Attorney General’s office review the Code of Virginia to ensure that VDH’s Office of Emergency Medical Services (OEMS) has the authority to allow delayed implementation by all licensed EMS agencies. Robin Kurz will provide a response to Mr. Edwards’ question.

Mr. Brown indicated that participation in the current registry is greater than 90%. The Code does require all licensed agencies to submit data to VDH, but it has not been OEMS practice to be punitive in enforcing that requirement.

Dr. Remley suggested that cases where there may be noncompliance be sent to her for review to determine whether a good faith effort is being made to achieve compliance.

The data set was unanimously approved by the Board.

#### Lunch Presentation

Dr. Leah Bush, Virginia’s Chief Medical Examiner, provided a presentation concerning the Office of the Chief Medical Examiner.

There was a discussion related to training given to physicians regarding how to properly certify a death and complete a death certificate. Dr. Remley indicated that VDH hopes to work with the Department of Health Professions (DHP) to offer free CME on DHP’s website on how to properly fill out death certificate.

There was also a discussion of mass casualty preparedness plans. Dr. Bush indicated that VDH always works with hospitals on mass casualty planning. In the event of a mass casualty disaster, a decision would have to be made by state policy makers concerning specific strategies (i.e., use of mass graves, and/or refrigerated trucks). There is a plan with the Department of Forestry to move bodies to three areas where tree seedlings are stored, and to move the seedlings to a refrigerated truck. There was a suggestion about the possibility of using ice skating rinks in addition to using refrigerated trucks.

#### Regulations Governing the Virginia Nurse Educator Scholarship Program (12VAC5-545) (Fast Track Regulatory Action)

Dr. Mike Royster, Director of the Office of Minority Health and Public Health policy, presented the fast track regulatory action. The proposed action was unanimously approved.

#### Appointment of the Nominating Committee

Dr. Reed reported Mr. Hannett’s recommendations for the following individuals to serve as the nominating committee: Scott Burnette, Barbara Favola, and Craig Reed. The recommendation was unanimously approved. The committee will report its recommended slate of officers at the April Board meeting.

## Member Reports

*Dr. Charles Johnson – Virginia Dental Association.* He discussed SB622 which would prevent dental insurance plans (i.e., Delta Dental) from establishing the fee or rate that the dentist is required to accept, or from requiring that the dentist accept the reimbursement paid by the dental plan as payment in full, unless the services are covered services under the dental plan. The Virginia Dental Association is supporting this legislation.

*Dr. Bennie Marshall – Virginia Nurses Association.* VNA is examining potential expansions to the scope of practice for nurse practitioners. There is misdistribution of nursing resources, geographically and by type of facility (i.e., acute vs. long term care). She also discussed VDH's Nurse Educator Scholarship program. She told the Board that the focus of this program should not be too much towards masters-trained faculty who will teach at community colleges, as opposed to educators who teach at four year colleges and universities.

*Dr. Bhushan Pandya – Medical Society of Virginia.* He commended the choice of Dr. Bill Hazel as Secretary of Health and Human Resources.

*Dr. Craig Reed – Virginia Veterinary Medical Association.* No report.

*Jim Edmondson – Consumer Representative.* He continues to participate with the VDH Healthcare Associated Infections task force. He also noted that Fairfax County is in process of re-planning Tyson's Corner to make it at least somewhat "walkable". However, he thinks that the county is failing in this regard and that he believes it is a public health issue. He will be making a brief presentation to the planning committee. He believes that this is also an important issue for the Board. Mr. Edmondson also commented on health care reform legislation at the federal level, and stated that there is an amazing amount of misinformation being disseminated.

*Paul Clements – Nursing Home Industry Representative.* Medicare and Medicaid cuts will have negative implications on long term care facility operations. There have been layoffs, wage freezes, position eliminations. 1,500 long term care positions have been eliminated in Virginia, and another 1,500 expected this year. There is increased unemployment in communities; many employees are single moms. Virginia has one of the highest nursing home acuity rates and one of the lowest Medicaid reimbursement rates in the country.

*Bruce Edwards – Emergency Medical Services Representative.* No report.

*Scott Burnette – Hospital Industry.* Rural facilities are in serious trouble with regard to pending Medicaid cuts. With regard to the definition of "meaningful use" in CMS electronic health record regulations, there are only six vendors in the US that would enable compliance with this regulatory definition.

*Julie Beales – Medical Society of Virginia.* The VA Medical Center received funding to reach out to Native Americans in Virginia, and it is partnering with some local health departments in that regard. It has received additional funding for rural health, and staff wants to work with VDH on the best way to leverage these funds. Mr. Lake indicated that he will make himself as well as his office available to help.

*Dr. Anna Jeng – Public Environmental Health Representative.* She expressed concern about the alternative onsite sewage emergency regulations which are currently undergoing executive branch review, as well as related legislation that is pending in the General Assembly. She also expressed concern with the issues raised in a letter submitted to the Governor by the Loudoun County Board of Supervisors. VDH is preparing a draft response for the Governor. Jeff Lake described the underlying issues and acknowledged that this is a very controversial topic. Mr. Lake told the Board that VDH's proposed emergency regulations are more stringent than the provisions that are currently contained in Loudoun's local ordinance. Less than 1% of alternative on-site systems in Loudoun are failing based on state regulations.

*Willis Logan – Consumer Representative.* He has met with individuals in Charlottesville concerning ways to create stronger health care workforce. ARRA funds are available to assist in this effort. Dr. Remley has connected him with certain individuals concerning this topic. He requested an update on the state budget following House and Senate approval of their respective versions.

*David Summers – Virginia Association of Health Plans.* VAHP is following many bills pending in the General Assembly, particularly bills involving the mandated benefit for autism. VAHP is continuing to work with hospitals on ways to streamline billing processes such as web portals and standardization for those processes. VAHP wants to apply technology in order to reduce administrative, billing, and claims expenses.

#### Other Business

The Board reviewed and discussed a draft letter from the Board to Governor McDonnell concerning the Virginia Freedom of Information Act. The letter was approved with some minor revisions. Joe Hilbert will revise the draft and send it to Fred Hannett for further review.

#### Adjourn

The meeting adjourned at approximately 2:20 p.m.